FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

| | • |
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| OMB APP | |
| OMB Number: | 3235-0076 |
| Expires: | May 31, 2005 |
| Estimated average | |
| per response | 16.00 |
| | |

| SEC USE ONLY | | | | | | | | | |
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| Prefix | | Serial | | | | | | | |
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| DATE RECEIVED | | | | | | | | | |
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| Name of Offering (| check if this is an | amendment and name h | nas changed, and inc | licate change. |) | |
|---|----------------------|--------------------------|---|----------------|------------------------|-----------------------|
| Series A Preferred | Stock Financ | ing and Warrant Is | suance | | | |
| Filing Under (Check box | (es) that apply): | □ Rule 504 | ☐ Rule 505 | ☐ Rule 5 | 06 ☐ Section 4 | (6) 🛘 ULOE |
| Type of Filing: 🗵 Ne | w Filing 🗆 | Amendment | | | | Busessag : |
| | | A. BASIC I | DENTIFICATIO | N DATA | | Section |
| 1. Enter the information i | requested about the | he issuer | | | | 1114 0 2 2008 |
| Name of Issuer (□ ch | neck if this is an a | mendment and name ha | s changed, and indi | cate change.) | | |
| IO Informatics, Inc. | | | | | | Washington, DC |
| Address of Executive Off | fices | (Number an | d Street, City, State | Zip Code) | Telephone Number (I | Including Area Corte) |
| 2550 9th Street, Su | ite 114, Berke | eley CA 94710-255 | 2 | | (510) 705-8470 | · |
| Address of Principal Bus | iness Operations | (Number an | d Street, City, State | , Zip Code) | Telephone Number (I | Including Area Code) |
| (if different from Executi | ve Offices) | | | | | |
| Brief Description of Busi | ness | | | | | |
| Software Company | | | | | | PROCESSED |
| Type of Business Organia | zation | | | | | PROCESSED |
| | ☐ limited pa | rtnership, already forme | ed 🗆 other (j | olease specify |): limited liability c | JUN 0 5 2008 |
| ☐ business trust | ☐ limited pa | rtnership, to be formed | | | - <u>.</u> | JUN 0 0 2000 |
| Actual or Estimated Date Jurisdiction of Incorporat | - | on: (Enter two-letter U | Month Year 0 6 0 3 S. Postal Service ab I for other foreign ju | | | THOMSON REUTERS |
| | | | | | | |

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

SEC 1972 (6-02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| | A. BASIC IDENT | IFICATION DATA | | |
|---|--|-------------------------------|------------|--------------------------------------|
| Enter the information requested for the f Each promoter of the issuer, if the iss Each beneficial owner having the powthe issuer; Each executive officer and director of Each general and managing partner or | uer has been organized within wer to vote or dispose, or dire froorporate issuers and of cor | ect the vote or disposition o | | |
| Check Box(es) that Apply: Promoter | Beneficial Owner | Executive Officer | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | ·· · |
| Stanley, Robert | | | | |
| Business or Residence Address (Number and | Street, City, State, Zip Code |) | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |
| Check Box(es) that Apply: ☐ Promoter | ☑ Beneficial Owner | E Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Gombocz, Erich | | | | |
| Business or Residence Address (Number and | • • | • | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |
| Check Box(es) that Apply: Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Business or Residence Address (Number and | Street, City, State, Zip Code |) | | |
| Check Box(es) that Apply: ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Englehorn, Sheldon | | | | |
| Business or Residence Address (Number and | Street, City, State, Zip Code |) | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |
| Check Box(es) that Apply: ☐ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Bowman, Elaine | | | | |
| Business or Residence Address (Number and | - | | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |
| Check Box(es) that Apply: Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☑ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Freyberg, Richard | | | | |
| Business or Residence Address (Number and | • | | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |
| Check Box(es) that Apply: Promoter | ■ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, if individual) | | | | |
| Sheldon Engelhorn and Susan M. | | | | |
| Business or Residence Address (Number and | · · · · · · · · · · · · · · · · · · · | | | |
| c/o IO Informatics, Inc., 2550 9th S | treet, Suite 114, Berke | ley CA 94710-2552 | | |

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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security 0 Debt..... 3,948,054 3.948.054 Equity..... ☐ Common Preferred 592,208 Convertible Securities (including Notes and Warrants) 0 Partnership Interests 0 0 Other (Specify _____)..... 4,540,262 4.540.262 Total Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this Aggregate offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, Dollar Amount indicate the number of persons who have purchased securities and the aggregate dollar amount of Number Investors of Purchases their purchases on the total lines. Enter "0" if answer is "none" or "zero." 4,540,262 5 Accredited Investors 0 0 Non-accredited Investors 0 0 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C -Question 1. **Dollar Amount** Type of Security Sold Type of offering 0 Rule 505 0 Regulation A..... 0 Rule 504 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees 0 Printing and Engraving Costs..... 15,000 X Legal Fees Accounting Fees 0 Engineering Fees 0 Sales Commissions (specify finders' fees separately) 875 Other Expenses (Blue Sky Fees).....

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total

15,875

X

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| | D. OFFERING PRICE, NUMBER (| OF INVESTORS, EXPENSES A | UND | USI | OF PROCE | ,ED | 5 | |
| | b. Enter the difference between the aggregate offer Question I and total expenses furnished in response to the "adjusted gross proceeds to the issuer." | Part C - Question 4.a. This difference | c is | | | | s _ | 4,524,387 |
| 5. | Indicate below the amount of the adjusted gross proceed for each of the purposes shown. If the amount for any j and check the box to the left of the estimate. The tot adjusted gross proceeds to the issuer set forth in response | ourpose is not known, furnish an esti- al of the payments listed must equa | mate | | | | | |
| | 3.000 3.000 3.000 3.000 | \ | | | Payments to Officers, & Affiliates | | | Payments To Others |
| | Salaries and fees | *************************************** | | s — | 0 | | s- | 0 |
| | Purchase of real estate | *************************************** | | \$ | 0 | | s_ | 0 |
| | Purchase, rental or leasing and installation of machi | nery and equipment | | \$ — | 0 | | s– | 0 |
| | Construction or leasing of plant buildings and facili | | | s — | 0 | | s_ | 0 |
| | Acquisition of other businesses (including the value offering that may be used in exchange for the assets | of securities involved in this | | | ۰ | | | 0 |
| | pursuant to a merger) | | | S —- | 0 | | \$ _ | 0 |
| | Repayment of indebtedness | *************************************** | | s — | 0 | | S – | 0 |
| | Working capital | | | s — | <u>_</u> | | S - | 4,524,387 |
| | Other (specify): | | | \$ | 0 | | S- | 0 |
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| | Column Totals | | | 5 | 0 | 区 | S | 4,524,387 |
| | Total Payments Listed (column totals added) | | | | ⊠ \$—— | | 4, | 524,387 |
| _ | D. | FEDERAL SIGNATURE | | | | - | | <u> </u> |
| sig | e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furnish ormation furnished by the issuer to any non-accredited inv | ndersigned duly authorized person. I to the U.S. Securities and Exchange | Con | ımiss | ion, upon writt | Ru n re | ile 50 eque | 05, the following st of its staff, the |
| Iss | ucr (Print or Type) | Signature 2 | | | \sum | Date | ; | |
| IC | Informatics, Inc. | Notout Il | H | u~/ | le 1 | ay | 2 | 2, 2008 |
| Na | me of Signer (Print or Type) | Title of Signer (Print or Type) | | | 7 | | | |
| R | obert Stanley | President | | | | | | |
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| | | ATTENTION | | | | _ | | |
| | Intentional misstatements or omissions of t | fact constitute federal crimin | al v | iolai | tions. (See | 8 (| J.S. | .C. 1001.} |

| 27 0 | 8 11:14a IO Informatics | (510) 705-8476 | p./ |
|-------|---|---|---|
| | | | |
| | | E. STATE SIGNATURE | |
| | | | Yes No |
| ₹. | Is any party described in 17 CFR 230.262 preser such rule? | ntly subject to any of the disqualification provisions of | D B |
| | Sce | Appendix, Column 5, for state response. | |
| 2. | The undersigned issuer hereby undertakes to fur (17 CFR 239.500) at such times as required by s | mish to any state administrator of any state in which this not state law. | ice is filed, a notice on Form D |
| 3. | The undersigned issuer hereby undertakes to fur offerees. | rnish to the state administrators, upon written request, inform | ation furnished by the issuer to |
| 4. | The undersigned issuer represents that the issue Offering Exemption (ULOE) of the state in vexemption has the burden of establishing that the | er is familiar with the conditions that must be satisfied to be which this notice is filed and understands that the issuer classe conditions have been satisfied. | entitled to the Uniform limited aiming the availability of this |
| | ssuer has read this notification and knows the cont authorized person. | tents to be true and has duly caused this notice to be signed on | its behalf by the undersigned |
| Issuc | r (Print or Type) | Signature | Date |
| IO Ir | nformatics, Inc. | Mittent I Banker | May 27 2008 |

Title of Signer (Print or Type)

President

Instruction.

Name of Signer (Print or Type)

Robert Stanley

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

| 1 | | 2 | 3 | 3 4 | | | | | | | | |
|-------|--------------------|--|--|------------|--|-----------------------------|-------------|----------|----|--|--|--|
| | non-ac investor | to sell to credited s in State -Item 1) | Type of security and aggregate offering price offered in State (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | | | | |
| | | | Series A Preferred Stock and Warrants | Accredited | | Number of Non-Accredited | | | | | | |
| State | Yes | No | WALLADIS | Investors | Amount | Investors | Amount | Yes | No | | | |
| AL | | | | | | | <u>.</u> | | | | | |
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| AZ | | | | | | | | | | | | |
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APPENDIX

| 1 | Intend non-ac investor | to sell to credited s in State I-Item 1) | Type of security and aggregate offering price offered in State (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | | | | |
|-------|------------------------|--|--|--------------------------------------|---|--|----------|-----|------|--|--|--|
| State | Yes | No | Series A Preferred Stock and Warrants | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | | |
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